STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017003	A. BUILDING: _____ B. WING _____	C 06/27/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKSIDE	330 OAK AVE NEW RICHMOND, WI 54017

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
M 000	INITIAL COMMENTS On 06/21/2023, Surveyor conducted a standard licensing survey at Oakside. Data was collected through 06/27/2023. Four deficiencies were identified. Census: 4	M 000		
M 276	88.05(3)(a) HOME ENVIRONMENT An adult family home shall be safe, clean and well-maintained and shall provide a homelike environment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the home was clean and well-maintained. Findings include: The provider is licensed to care for 4 residents in the client groups advanced aged, emotionally disturbed/mental illness, alcohol/drug dependent, developmentally disabled, terminally ill, irreversible dementia/Alzheimer's disease, and traumatic brain injury. On 06/21/2023, from 12:25 PM to 3:05 PM, Surveyor was onsite and observed the following: - Floors throughout the facility had visible dirt and debris. - Floors throughout the facility had evidence of a spilled dark substance such as coffee or dark	M 276		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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M 276	Continued From page 1 soda. - The internal doors were painted white and had visible grime/discoloration on high-touch areas. - Countertops and tables had crumbs, food residue, and dust. - Kitchen cabinets had evidence of spilled food and were sticky to the touch. - Bathrooms were not clean, evidenced by dark stains in toilets, hair/dust on surfaces, and debris on the floors. At 2:38 PM, Surveyor asked Resident 1 who cleaned the facility. Resident 1 stated, "No one really." At 2:40 PM, Surveyor interviewed House Manager (HM) A. HM A stated staff were responsible for cleaning. HM A agreed that the house was not clean and stated staff from other facilities owned by the licensee have refused to fill in at the site because of it. HM A stated, "Staff have told me they won't work here because it is gross." HM A said some staff also refuse to clean during their shift.	M 276		
M 402	88.06(2)(c)8 RESIDENT RIGHTS AND GRIEVANCE A statement indicating that the resident rights and grievance procedures have been explained and copies provided to the resident and the resident's guardian or designated representative, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 residents reviewed (Resident 2) received the resident rights and	M 402		

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M 402	Continued From page 2 grievance procedure upon admission. Findings include: On 06/21/2023, Surveyor reviewed Resident 2's record. Resident 2 was admitted on 03/02/2021. Resident 2 did not have a guardian or healthcare power of attorney. His/her record did not include evidence that resident rights or the provider's grievance procedure was explained or provided upon admission. On 06/27/2023, House Manager (HM) A sent an email to Surveyor indicating s/he could not find evidence that Resident 2 was provided his/her rights or grievance procedure. The email read, "[Resident 2] was admitted to Oakside prior to my hire, so I can't speak to [his/her] admit personally."	M 402		
M 466	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure medication administration, errors, and omissions were	M 466		

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M 466	Continued From page 3 documented for 1 of 2 residents sampled (Resident 2). Findings include: The provider is licensed to care for 4 residents in the client groups advanced aged, emotionally disturbed/mental illness, alcohol/drug dependent, developmentally disabled, terminally ill, irreversible dementia/Alzheimer's disease, and traumatic brain injury. On 06/21/2023 at 12:30 PM, Surveyor interviewed House Manager (HM) A. HM A stated Resident 2 was resistive to assistance and was generally not compliant with his/her medications. Surveyor reviewed Resident 2's record. Resident 2 was admitted on 03/02/2021 with diagnoses that include schizoaffective disorder, major depressive disorder, anxiety, and hypertension. Resident 2's June 2023 Medication Administration Record (MAR) indicated Resident 2 was prescribed 6 daily medications. The MAR had blanks on the 19th, 20th, and 21st. The MAR did not indicate if the medications were administered or omitted for any reason. On 06/27/2023, Surveyor asked via email if there was a reason Resident 2's MAR was not completed on the 19th, 20th, and 21st. HM A responded, "[Resident 3's] MAR has been updated and all staff reminded to document/update on their shift."	M 466		
M 474	88.07(4)(c) FOOD PREPARED AND STORED SANITARY WAY	M 474		

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M 474	Continued From page 4 Food shall be prepared and stored in a sanitary manner. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure food was prepared and stored in a sanitary manner. Findings include: The provider is licensed to care for 4 residents in the client groups advanced aged, emotionally disturbed/mental illness, alcohol/drug dependent, developmentally disabled, terminally ill, irreversible dementia/Alzheimer's disease, and traumatic brain injury. On 06/21/2023 at approximately 12:40 PM, House Manager (HM) A explained that Resident 1 did most of the meal planning and cooking for the home. Surveyor observed the kitchen and food storage. The kitchen was not clean, evidenced by leftover food residue on the countertops, cabinet doors, stove, and microwave. The cabinets were sticky to the touch. The shelves and bottom of the refrigerator had food debris and evidence of spilled liquid that had not been wiped up. There was a carton of moldy strawberries and leftovers that were not date-marked or stored in sealed containers in the refrigerator. At 12:50 PM, Surveyor interviewed Resident 1. Resident 1 stated s/he was responsible for labeling food, cleaning the kitchen, and cooking the meals "because they are short of help and I'm	M 474		

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M 474	Continued From page 5 trying to get out on my own."	M 474		